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| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. | | | | |
|---------------------------------------------------------------------------------|-------------|----------------------|---------------------|------------------|--|--|--|--|
| 10/782,758 | 02/23/2004 | Katsunori Kawano | 118797 | 6184 | | | | |
| TITLE OF DIVIDITION, HOLOODAM ED ACIDIO METHOD AND HOLOODAM ED ACIDIO ADDADATIC | | | | | | | | |

TITLE OF INVENTION: HOLOGRAM ERASING METHOD AND HOLOGRAM ERASING APPARATUS

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| APPLN, TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE | | |
| nenprovisional | NO | \$1440 | \$300 | \$0 | \$1740 | 09/02/2008 | | |
| EXAMINER ART UNIT | | ART UNIT | CLASS-SUBCLASS | LASS-SUBCLASS | | | | |
| GIESY, ADAM 262 | | 2627 | 369-103000 | • | | | | |
| Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). □ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. □ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | | | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | | | |
| (A) NAME OF ASSIGNEE Fuji Xerox Co., Ltd. | | | e data will appear on the patent. If an assignee is identified below, the document has been filed in a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) Tokyo, Japan printed on the patent): Individual Corporation or other private group entity Government. | | | | | |
| Please check the appropr | nate assignee category or | categories (will not be pr | rinted on the patent): | Individual | on or other private group | entity Governmen | | |
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| a. Applicant claim | itus (from status indicated | is. See 37 CFR 1.27. | , | ger claiming SMALL ENT | | | | |
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| Authorized Signature | | 5 | | | 0008 99999929 19782 | | | |

Typed or printed name James E. Golladay, II

Registration No. 58,182 00 FF-150A

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